



ATTORNEY DOCKET NO. 71711

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Heiberger et al.

Appln. No.: 09/934,803

Filed: August 22, 2001

For: HOMOPOLAR MACHINE WITH SHAFT
AXIAL THRUST COMPENSATION
FOR REDUCED THRUST BEARING
WEAR AND NOISE

Group Art

Unit: 2834

Examiners: Burton S. Mullins

CERTIFICATE OF MAILING

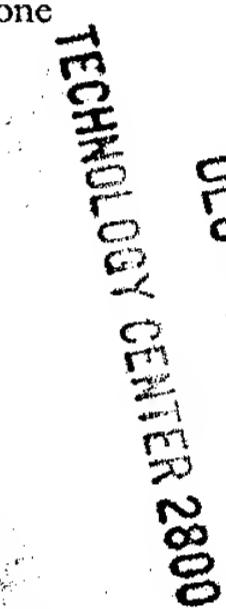
I hereby certify that this paper is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, U.S. Patent & Trademark Office, Washington, D.C. 20231, on this date.

November 22, 2002

Date

Pamela M. Stone

Pamela M. Stone



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Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

As a supplement to the Information Disclosure Statement filed on August 22, 2001, and the Supplemental Information Disclosure Statement filed on November 20, 2001, enclosed herewith is a copy of one document listed as item AA on the attached Form PTO-1449.

The filing of this Information Disclosure Statement is being made after the receipt of the first Office Action pursuant to 37 CFR 1.97(c). Therefore, a fee is believed to be due. A Fee Transmittal to cover this fee is included herewith.

The filing of this Information Disclosure Statement shall not be construed to mean that a search has been made. See 37 CFR 1.97(g).

0933403

12/02/2002 WABEELR1 00000131 061135

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IDS
S.N. 09/934,803

Further, the filing of this Information Disclosure Statement shall not be construed as an admission that any publication or other information referred to herein is, or is considered to be, material to patentability as defined in 37 CFR 1.56(b). See 37 CFR 1.97(h).

Concise Explanation of Relevance

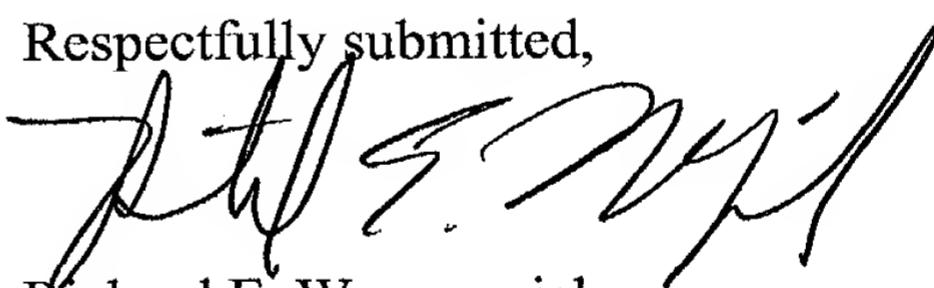
Item AA listed on the Form PTO-1449 is not in the English language.

A concise explanation of the relevance of item AA is provided in an English-language translation of the abstract also included herewith.

It is requested that the information provided herein be made of record in this application.

Dated: 11/22/02

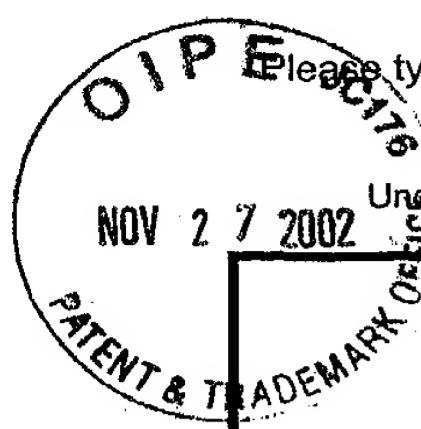
Respectfully submitted,



Richard E. Wawrzyniak
Reg. No. 36,048

Address all correspondence to:

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PTO/SB/21 (08-00)

Approval for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

\$2834

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/934,803
		Filing Date	August 22, 2001
		First Named Inventor	Heiberger, Michael
		Group Art Unit	2834
		Examiner Name	Mullins, Burton S.
Total Number of Pages in This Submission	24	Attorney Docket Number	71711

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Form PTO-1449 - copy of one (1) reference - Return Receipt Postcard
Remarks		- Amendment and Response to Office Action mailed August 22, 2002

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual name	Richard E. Wawrzyniak, Reg. No. 36,048 FITCH, EVEN, TABIN & FLANNERY
Signature	
Date	11/22/02

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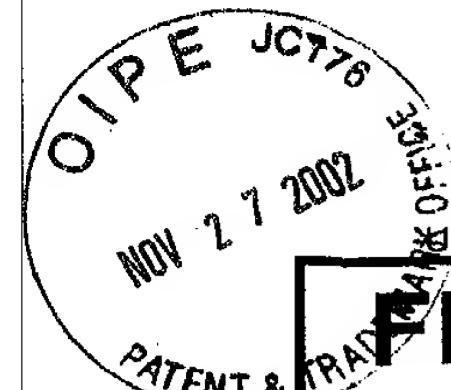
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November 22, 2002

Typed or printed name	Pamela M. Stone
Signature	
	Date November 22, 2002

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FEET TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT \$264.00

Complete if Known	
Application Number	09/934,803
Filing Date	August 22, 2001
First Named Inventor	Heiberger, Michael
Examiner Name	Mullins, Burton S.
Group Art Unit	2834
Attorney Docket No.	71711

METHOD OF PAYMENT	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:	
Deposit Account Number	06-1135
Deposit Account Name	Fitch, Even, Tabin & Flannery
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	
2. <input type="checkbox"/> Payment Enclosed:	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) \$00.00

2. EXTRA CLAIM FEES

Total Claims	19	-20**=	0	X	0	=	0	Fee from below	Fee Paid
Independent Claims	4	-3**=	1	X	\$84.	=	\$84.		
Multiple Dependent					0	=	0		

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$84.00

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES	Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
	105	130	205	65 Surcharge - late filing fee or oath	
	127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
	139	130	139	130 Non-English specification	
	147	2,520	147	2,520 For filing a request for ex parte reexamination	
	112	920*	112	920* Requesting publication of SIR prior to Examiner action	
	113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
	115	110	215	55 Extension for reply within first month	
	116	400	216	200 Extension for reply within second month	
	117	920	217	460 Extension for reply within third month	
	118	1,440	218	720 Extension for reply within fourth month	
	128	1,960	228	980 Extension for reply within fifth month	
	119	320	219	160 Notice of Appeal	
	120	320	220	160 Filing a brief in support of an appeal	
	121	280	221	140 Request for oral hearing	
	138	1,510	138	1,510 Petition to institute a public use proceeding	
	140	110	240	55 Petition to revive - unavoidable	
	141	1,280	241	640 Petition to revive - unintentional	
	142	1,280	242	640 Utility issue fee (or reissue)	
	143	460	243	230 Design issue fee	
	144	620	244	310 Plant issue fee	
	122	130	122	130 Petitions to the Commissioner	
	123	50	123	50 Processing fee under 37 CFR 1.17(q)	
	126	180	126	180 Submission of Information Disclosure Stmt	\$180.
	581	40	581	40 Recording each patent assignment per property (times number of properties)	
	146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
	149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
	179	740	279	370 Request for Continued Examination (RCE)	
	169	900	169	900 Request for expedited examination of a design application	
	Other fee (specify) _____				
	*Reduced by Basic Filing Fee Paid				
	SUBTOTAL (3)				
	\$180.00				

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) \$180.00

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Richard E. Wawrzyniak	Registration No. (Attorney/Agent)	36,048	Telephone 858-552-1311
Signature			Date	11/22/02

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